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CONFIRMATION NO. 2244

<b>SERIAL NUMBER</b> 10/811,542	<b>FILING OR 371(c) DATE</b> 03/29/2004 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3738	<b>ATTORNEY DOCKET NO.</b> 109841-17
<b>APPLICANTS</b> Gerald D. Buckberg, Los Angeles, CA; Constantine L. Athanasuleas, Birmingham, AL;				
<b>** CONTINUING DATA *****</b> This application is a CON of 10/216,348 08/09/2002 ABN which is a CON of 09/689,254 10/11/2000 PAT 6,450,171 which is a CON of 09/235,664 01/22/1999 PAT 6,221,104 which is a CIP of 09/071,817 05/01/1998 PAT 6,024,096				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 06/10/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Allowance</u> Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 18
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> 27189				
<b>TITLE</b> Anterior and inferior segment ventricular restoration apparatus and method				
<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	